PTO/SB/22 (09-06)
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		eduction Act of 1995, no persons are required				- Control Hambor					
PETITI	ION FOR EX	TENSION OF TIME UNDER 3	Docket Number (Optional)								
/Ease	nurcuant to th	FY 2006 e Consolidated Appropriations Act,	APA-0214								
			51-1 0-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-								
	tion Number		Filed September 7, 2004								
FUEL PRESSURE DETECTOR FOR COMMON RAIL TYPE FUEL INJECTION APPARATUS, AND COMMON RAIL TYPE FUEL INJECTION APPARATUS EQUIPPED WITH THE FUEL PRESSURE DETECTOR											
Art Unit	t 3747			Examiner	C. S. Mi	ller					
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):											
The rec	questea exter	ision and lee are as follows (che	ck time penda desi		oropriate is	e below).					
			<u>Fee</u>	Small Entity Fee	_						
	X One mo	onth (37 CFR 1.17(a)(1))	\$120	\$60	\$	120.00					
	Two mo	onths (37 CFR 1.17(a)(2))	\$450	\$225	\$_						
	Three n	nonths (37 CFR 1.17(a)(3))	\$1020	\$510	\$						
	Four me	onths (37 CFR 1.17(a)(4))	\$1590	\$795	\$						
	Five mo	onths (37 CFR 1.17(a)(5))	\$2160	\$1080	\$						
Applicant claims small entity status. See 37 CFR 1.27.											
	A check in the amount of the fee is enclosed.										
	Payment by	credit card. Form PTO-2038 is a	ttached.								
X	The Director	has already been authorized to o	charge fees in this a	application to a Depo	sit Accoun	t.					
x -	The Director	is hereby authorized to charge a	ny fees which may	be required, or credit	t any overp	payment, to					
	Deposit Acco	•	•	osed a duplicate copy		-					
lam	n the	applicant/inventor.									
		• •	. :	OED 2.74							
		assignee of record of the entir Statement under 37 CFR	e interest. See 37 i 3.73(b) is enclosed.	. (Form PTO/SB/96)							
	х	attorney or agent of record. R	egistration Number	22,663							
		attorney or agent under 37 CF	R 1.34.								
		Registration number if acting ur	nder 37 CFR 1.34	 	•						
	/5	//. 47	255	Januar	y 25, 2007						
		Signature	Date								
		David T. Nikaido	(202) 955-3750								
-		Typed or printed name	Telephone Number								
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.											
	Total of	1 forms are subm	nitted.								

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PTO/SB/17 to 7-06)
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Fees pursuant to t		n 12/08/2004 Appropriati		R. 4818).	Application Number		10/506,793-Conf. #6534						
FEE TRANSMITTAL					Filing Date		September 7, 2004						
					First Named Inventor		Hitoshi Adachi						
For FY 2006					Examiner Name		C. S. Miller						
Applicant claims small entity status. See 37 CFR 1.27					Art Unit		3747						
TOTAL AMOU	NT OF PAYMI	ENT	(\$) 120.00		Attorney Docket No. APA-0214								
METHOD OF PAYMENT (check all that apply)													
Check Credit Card Money Order None Other (please identify):													
x Deposit Account Deposit Account Number: 18-0013 Deposit Account Name: Rader, Fishman & Grauer PLLC													
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)													
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee													
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17													
	FEE CALCULATION												
1. BASIC FILIN	G, SEARCH,												
		FILIN	G FEES Small Entity	SE	ARCH FEES Small Enti		IATION FEES Small Entity						
Application Ty	уре	Fee (\$)	Fee (\$)	Fee (\$		Fee (\$)	Fee (\$)	Fees P	aid (\$)				
Utility		300	150	500	250	200	100						
Design		200	100	100	50	130	65						
Plant		200	100	300	150	160	80						
Reissue		300	150	500	250	600	300						
Provisional		200	100	0	0	0	0						
2. EXCESS CLA	AIM FEES							Fee (\$)	Small Entity				
Fee Description									Fee (\$)				
									25				
Each independe		3 (includi	ng Reissues)					200	100				
Multiple depend							W 1- B	360	180				
								ndent Claims Fee Paid (\$)					
HP = highest num	- 20 =	X spaid for if o	reater than 20.			<u>re</u>	e (\$)	ree Faiu (\$					
Indep. Claims	Extra Cla		Fee (\$)	Fee I	Paid (\$)				_				
	-4=	×	=										
HP = highest num	ber of independer	nt claims pai	d for, if greater tha	n 3.					_				
3. APPLICATIO													
If the specifica	ation and draw	ings exce	ed 100 sheets of	of paper	(excluding ele	ectronically fi	led sequence or	computer	`				
sheets or fr	ler 3/ CFK 1.3 action thereof	52(e)), the See 35 I	application siz	e iee au (G) and	16 15 \$250 (\$12 37 CFR 1 16((s)	ntity) for each a	uuiiioiiai 30	,				
Total Sheet							f Fee (\$)	Fee F	Paid (\$)				
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = /50 (round up to a whole number) x =													
4. OTHER FEE	_							Fees	Paid (\$)				
	• •	, \$130 fe	e (no small en	tity disc	ount)								
Other (e.g., late filing surcharge): 1251 Extension for response within first month 120.00													
SUBMITTED BY													
Signature	14		<u>ノ.</u>		Registration No. (Attorney/Agent)	22,663	Telephone	(202) 95	5-3750				
Name (Print/Type) David T. Nikaido / BRIAN					Dutton	47255	Date	January 25, 2007					
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